



B O R O U G H O F L I S K E A R D

T H E

A N N U A L R E P O R T


O F T H E

M E D I C A L O F F I C E R O F H E A L T H

F O R T H E Y E A R

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P. J. FOX, M.B., B.CH., B.A.O., D.P.H.



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TO THE MAYOR, ALDERMEN, AND COUNCILLORS OF THE CORPORATION OF THE
BOROUGH OF LISKEARD

Your Worship, Ladies, and Gentlemen,

During the year 1962 a small increase of 330 in the estimated population of No. 7. Health Area occurred. It is yet too early to detect any tendency for an increase in the population in those districts close to the western end of the new Tamar Bridge, but it appears likely that any such growth will not be rapid unless and until further reductions in bridge toll payments can be achieved.

The excess of deaths over births which had persisted since 1957 was in 1962 converted into a small excess of births over deaths. As a result the birth rate for the Health Area more closely approached the national birth rate, though still below it. There was a moderate reduction in the number of still births, and a moderate increase in the number of infant deaths. Looking more closely at the latter figure which totalled 13 it is found that 8 of these infants died in the critical perinatal period within one week of birth and a further 2 did not survive beyond four weeks from birth.

Recent increases in the number of illegitimate births have been cited as evidence of a lowering of moral standards, and a decline in the sense of responsibility which should be shown towards the begetting of a child. Whatever my personal and private views are on the moral issue, I and other workers in the field of public health and social medicine are bound to feel concern about the welfare and nurture of any child starting life without the support and stability normally available to a child born in wedlock. It is I think true that arrangements for the fostering and adoption of these children are now better than was the case in the past. Nevertheless the illegitimate child however kind the fostering or adopting parents are, usually has greater emotional problems than the normal child, with a greater risk of psychological difficulties, and maladjustment. In an endeavour to assess the size of the problem in South East Cornwall I have been looking at the numbers of illegitimate births registered in the thirteen years from 1950 to 1962 inclusive. In the last of these years, 1962, these births numbered 40 which represents 5.6 per cent of the total live births registered in that year. This is a very slight increase on the figure of 5.5 per cent in 1961 and very little above the proportion as long ago as 1950 when it was 5.4 per cent. From a study of these figures it would appear that over the past decade there has been little or no increase in illegitimacy in this part of Cornwall.

As far as the principal causes of death are concerned the pattern in 1962 resembles that seen in previous years. Heart disease retains its place at the head of the list being responsible for more than twice the number of deaths due to either cancers or strokes which follow it in that order. Of the defined forms of cancer, that affecting the stomach was slightly more prevalent than lung cancer and breast cancer. The average age at which death occurred remained close to the latest figures for life expectancy being 69 years for men and 73 years for women. Of those who died during the year 49% had reached or exceeded the age of 75 years at the time of death.

The incidence of notifiable disease (excluding tuberculosis) was only moderate. Of the 459 cases notified 362 were of measles which was most prevalent in the St. Germans Rural District. Of the more serious infectious diseases there were two cases of meningitis and two of acute encephalitis. The latter disease which is an inflammation of the brain usually appears as a sequel or complication of a less serious infectious disease such as measles, whooping cough, or influenza. In fact one case of encephalitis followed measles in a twelve year old boy, and one complicated a smallpox vaccination in a 44 year old adult.

/For the

For the first time for very many years no cases of poliomyelitis were notified, and there seems little doubt that the major credit for this must be given to the campaign for immunisation against this disease which has been carried out in recent years. I can only hope that the great reduction in the prevalence of poliomyelitis will not induce in parents any sense of complacency which might lead to a reduction in the number of infants being immunised against this disease.

I regret that I cannot give the same encouraging report about tuberculosis as unfortunately in 1962 the number of new cases notified in the Health Area showed a moderate increase over the 1961 figure. During the year 26 new cases of respiratory tuberculosis and 2 new cases of non-respiratory tuberculosis were notified as compared with 16 and 5 respectively in the previous year. Males were more involved in the increased incidence and amongst them two thirds of the newly discovered infections were in men aged 45 years and over at the time of notification. The age group hardest hit was from 45 to 64 years in which there were nine cases. This higher incidence of tuberculosis in males over the age of 45 years gives support to the belief that the main reservoir of tuberculous infection is probably located in this section of the population and it is therefore unfortunate that individuals in this age group, and especially the men, tend to resist or ignore altogether efforts to arrange for them chest x-ray examinations. Such reluctance or outright refusal to avail themselves of this diagnostic facility renders difficult the discovery not only of tuberculosis but of the earlier stages of lung cancer, and of certain heart conditions which are not uncommon in this age group.

The welfare and care of the elderly continue to pose problems in spite of the greater provision by District Councils by way of dwellings specially designed to meet the needs of old people, and by more places in residential homes which the County Council provides. The chief anxiety felt by those trying to care for old people in their own homes arises from the difficulty and delay in obtaining a hospital bed when chronic illness and the degenerative processes affecting the mind and body of the old person make it impossible for them to continue at home. It is not very encouraging to contemplate the prospect of trying to improve matters in this field of medical care. Shortage of accommodation in hospitals and the fact that most of the available accommodation is in old buildings which lack modern aids and amenities makes the lot of staff who have to care for the old people a difficult one. The task of giving medical, and nursing care to old people is not particularly interesting, and often involves much repetition of unpleasant duties. Under the best of working conditions it could be difficult to get staff to undertake this work, and any proposal to increase accommodation, might well be slowed down or halted by staffing difficulties, such as have been experienced in keeping maternity homes in operation. I feel that as much of the care of old bedfast persons does not call for a great deal of medical or nursing skill some of it might be undertaken in local authority homes specially equipped, and staffed, but outside the hospital service. This would free badly needed hospital beds and skilled nursing staff to deal with cases requiring special care for their condition.

In the broader field of public health where efforts to improve general environmental conditions have continued, steady if not spectacular progress has been made. There has been a reduction in the number of unfit dwellings occupied by families and old people, and some blocks of slum type houses in urban areas have or are being dealt with. Minor improvements in water supply arrangements have also been made, but further developments in this field will almost certainly call for large scale engineering works to provide an increase in storage capacity together with larger and perhaps additional distribution mains to meet the constantly growing demand for water.

In the matter of sewage disposal the two rural districts, and in particular the Liskeard Rural District are ahead of their urban neighbours in providing modern systems of sewage disposal. It is true that the Borough of Liskeard has been pursuing energetically the large scheme proposed by the consulting engineers, but progress towards a start on the actual work of laying sewers, and constructing the disposal works has been bedevilled by a series of irritating delays.

The deplorable state of affairs which leads to pollution of the sea-front at Looe by crude sewage continues to elicit complaints from visitors to that popular seaside resort. The solution of this problem which poses considerable engineering problems, and will be financially burdensome cannot be shelved indefinitely, and it should not be forgotten that the more the day of reckoning is put off the bigger will be the bill to be met.

In concluding this general preface to my 1962 reports I should like put on record my gratitude to the Members and Officers of the six County District Councils I serve for the co-operation and understanding I have received from them during the year.

I have the honour to be,

Your Worship, Ladies, and Gentlemen,

Your obedient Servant,

P.J.FOX.

Medical Officer of Health.

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LISKEARD BOROUGH COUNCIL

Health Committee (1961/62)

Councillor Mrs. E. W. M. Ellam	Chairman
Councillor J. Haworth	Vice-Chairman

Health Committee (1962/63)

Councillor Mrs. E. W. M. Ellam	Chairman
Councillor T. Lyon	Vice-Chairman

Health Officers of the Authority

Medical Officer of Health

P. J. Fox, M.B., B.Ch., B.A.O., D.P.H.

Health Area Office,
West Street,
LISKEARD,
Cornwall.

Telephone - Liskeard 3373

Chief Public Health Inspector

R. C. Decent, M.A.P.H.I.

Additional Public Health Inspectors

J. Stirling, M.A.P.H.I., R.S.A., (Scot).

D. H. Westwell, M.A.P.H.I., A.R.S.H.

Office Staff

H. R. Bradley

Mrs. B. Wills.

Council Offices,
West Street,
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Telephone - Liskeard 3177

BOROUGH OF LISKEARD

Area of Borough	2,704 acres
Population (Registrar General's Estimate)	4,560
Number of Inhabited Houses	1,675
Rateable Value	£68,541
Product of Penny Rate	£273

Vital Statistics for 1962

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Live Births	24	38	62
	<u>Liskeard M.B.</u>	<u>Health Area No.7</u>	<u>England & Wales</u>
Birth rate per 1,000 of population	15.0	16.7	18.0
Still births	None registered		
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths	45	59	104
	<u>Liskeard M.B.</u>	<u>Health Area No.7</u>	<u>England & Wales</u>
Death rate per 1,000 of population	11.4	12.4	11.9
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths of infants under one year of age	1	-	1
	<u>Liskeard M.B.</u>	<u>Health Area No.7</u>	<u>England & Wales</u>
Infant mortality rate per 1,000 live births	16.1	18.1	20.7
Maternal deaths	None registered		

Principal Causes of Death at All Ages

Heart disease	50
Cancer (all sites)	18
Stroke	14
Respiratory disease	5
Circulatory disease	5
Accidents	3

Average Age at Death

<u>Males</u>	<u>Females</u>
71	80

Infectious Disease. The incidence of notifiable disease other than tuberculosis was exceptionally light in the Borough during 1962 when 14 cases only were notified. There were no cases of more serious forms of infectious disease.

The following are details of numbers and case rates of infectious disease during the year:-

<u>Disease</u>	<u>Numbers</u>	<u>Case rate per 1,000 of population</u>	
		<u>Liskeard M.B.</u>	<u>Health Area No. 7.</u>
Whooping Cough	7	1.54	0.92
Measles	5	1.10	7.27
Pneumonia	1	0.22	0.54
Food Poisoning	1	0.22	0.04

Tuberculosis

Unhappily the very satisfactory state of affairs which I commented on in the section immediately preceeding was not experienced in 1962 in respect of tuberculosis. Here the Borough with 7 new cases of respiratory tuberculosis notified, had the unenviable distinction of having the highest case rate of the Six County Districts in the Health Area for this disease. Because of some uneasiness about the increased prevalence of tuberculosis in the Borough over the previous four years I arranged for a visit by the Mass Radiography Unit which provided public sessions in the town between the 19th. February and 1st March 1962. Unfortunately these sessions were not very well patronised by the general public, and no cases which might have been sources of infection were discovered. Of the 7 cases notified 4 were in the older age groups i.e. aged 45 years and upwards, a fairly common finding nowadays.

There was one death of a 71 year old male attributed to respiratory tuberculosis.

The following are details of new cases, death, case rates, and mortality rates for tuberculosis in the Borough.

<u>Age Group</u>	<u>New Cases</u>		<u>Deaths</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0 - 4	-	-	-	-
5 - 14	-	-	-	-
15 - 24	-	-	-	-
25 - 44	2	1	-	-
45 - 64	2	1	-	-
65 and over	1	-	1	-
	<u>5</u>	<u>2</u>	<u>1</u>	<u>-</u>

	<u>Rate per 1,000 of population</u>	
	<u>Liskeard M. B.</u>	<u>Health Area No.7</u>
New Cases	1.54	0.56
All known cases	8.11	5.97
Deaths	0.22	0.02

At the end of 1962 there were 33 known cases of respiratory tuberculosis, and 4 known cases of non-respiratory tuberculosis resident in the Borough.

National Assistance Act, 1948

No action under Section 47 of this Act was called for during 1962.

Water Supply

This was generally satisfactory in both quality and quantity during the year.

Sewerage and Sewage Disposal

The possibilities of future residential, and industrial development and the need to cater for them in any scheme for sewage disposal further delayed finalisation of this scheme. In spite of the sense of impatience and frustration felt by all at the irritating delays in making a physical start on this scheme, it is wise to examine carefully and allow for all factors which in the foreseeable future would affect the efficient operation of this large and expensive project.

Food.

The main task of the Chief Public Health Inspector and his staff in this field has again been the inspection of meat produced at the large slaughterhouse at Addington. In 1962, the total number of animals killed and inspected rose to 58,609 a 16% increase on the total of 1961. The fact that just over 59 tons of meat had to be condemned again shows the necessity for carrying out these duties. Because of the heavy pressure imposed by meat inspection it was not possible to undertake inspection of other premises in which food is handled.

No cases of food poisoning were notified during the year.

Factories Act, 1961

No difficulties in the operation of this Act were encountered during 1962.

Report of Chief Public Health Inspector

This report by Mr. R. C. Decent follows. Because of heavy pressure on Mr. Decent caused by increased time spent on meat inspection and by staff shortages there has been unavoidable delay in the production of this report by him. I should like to express to Mr. Decent, and his staff my gratitude for the help given me during 1962.

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR ENDED 31ST DECEMBER, 1962

TO: The Mayor, Aldermen and Councillors of the
 Corporation of the Borough of Liskeard

Your Worship, Ladies and Gentlemen,

I have pleasure in submitting my fourth annual report on the environmental health services of the Borough.

The most notable feature was the sustained progress in housing. The year saw the completion of 82 dwellings (Council owned and private enterprise) with a further 57 under construction. One new dwelling for every 33 inhabitants of the Borough !! The completion of Phase II of Lake Lane and the commencement of Phase IIA (36 old peoples' bungalows) made it possible for the Council to rehouse most of the inhabitants in Clearance Areas and to submit new areas for confirmation by the Minister of Housing and Local Government.

I regret a satisfactory habitation report is not accompanied by a good sanitation report, but this is not possible until the town's main sewage scheme eventually reaches fruition.

Food inspection especially at the Abattoir, accounted for much of the time of the public health inspectorate with the continuing upward trend in meat exports. The better facilities at the Abattoir, following the implementation of the Slaughterhouse Hygiene Regulations, at least made meat inspection a less unattractive occupation than previously.

Building inspections also increased again, and the amount of new buildings will undoubtedly show marked increases in future years. With only a proportion of new dwellings supervised in detail by Architects, building inspections under building bye-laws are an important if unspectacular facet of the work of the health department.

I am,
Your obedient servant,

R. C. DECENT

Chief Public Health Inspector

1. WATER SUPPLIES

The East Cornwall Water Board is responsible for the town's supply, which is extracted from the River Fowey and treated at St. Cleer Waterworks. All the water is treated by automatic chlorination. No supply difficulties were experienced throughout the year, despite the excess consumption largely due to wastage in parts of the old distribution system.

The Borough Council requested the East Cornwall Water Board (which assumed full responsibility for the distribution system in 1961), to give priority to the renewal of the West Street main. This work was completed by the Board during the year, and involved the replacement of almost 500 yards of defective 3" pipe, with a new 6" main.

Private Water Supplies

A few outlying farms and dwellings have private supplies. Bacteriological results obtained from samples were as follows:-

Satisfactory	3
Reasonably satisfactory	1

In the latter case appropriate advice was given to the owner/occupier concerned.

2. SEWERAGE AND SEWAGE DISPOSAL

It is disappointing to report, once again, little progress towards the execution of the main scheme. The position at the end of the year was that the Council's Engineering Consultants had nearly completed the preparation of plans, sections and detailed drawings of the scheme.

During the year a sewerage scheme for the Moorswater Industrial Estate was sanctioned by the Ministry of Housing and Local Government. The scheme provided for approximately 1000 yards of 6" sewer with a temporary discharge point to the East Looe River. This temporary discharge was permitted by the Cornwall River Board on condition that a connection is made to the proposed main trunk sewer as soon as practicable.

The contractors had nearly completed the work at the end of the year.

3. HOUSING

Action under Housing Act, 1957

(a) Clearance Areas

Houses demolished	12
-------------------	----

Confirmation of Pre-1962 Clearance Orders

The Ministry of Housing and Local Government confirmed the following orders:-

Cooks' Court and Cooks' Crescent	15 dwellings
Windsor Cottages	15 dwellings

New Clearance Orders

New orders were made in respect of

Squires Row	5 dwellings
10 - 16, Lower Lux Street	4 dwellings

After an Inquiry the Minister confirmed these Orders. The Council

also resolved that six Borough owned cottages at Martins Court should be cleared.

(b) Individual Unfit Houses

Closing Orders were made, or undertakings accepted, in respect of seven dwellings.

Improvement Grants

(a) Discretionary

Applications approved	9
Amount of Grants approved	£3080

(b) Standard

Applications approved	5
Amount of Grants paid	£841

New Houses Completed

(a) Local Authority Housing

Good progress was made with Phase II of the Council's Lake Lane Housing Scheme. This development comprises 66 houses, 14 old peoples' bungalows and garages. At the end of the year 27 three bedroom and 38 two bedroom houses, and three one bedroom bungalows had been completed.

The Council also decided to embark on Stage 2A at Lake Lane to provide a further 36 old peoples' bungalows. Work on this contract commenced in October.

(b) Private Enterprise

Fourteen dwellings were completed and a further 19 were under construction at the end of the year.

Rent Act, 1957 - Certificate of Disrepair

One application, the first application under the Act in this district, was granted. The necessary work was completed promptly.

4. BUILDING BYELAWS

The amount of time spent on building inspections and scrutiny of plans and proposals, was greater than in previous years.

126 applications for approval of plans were received.

5. PUBLIC CLEANSING

The Council operates a weekly collection service with extra collections for business premises.

A tractor was purchased for use on the tips. Fortunately the amount of suitable covering material freely available from builders' excavations continued to be ample. The main problem was pursuing the numerous contractors and their employees to ensure the material is deposited near where it is needed and not where it hinders work on the tip.

6. RODENT CONTROL

The amount of rodent infestation in the Borough remains slight. Two members of the manual staff are employed on rodent duties part time.

The following treatments were carried out

Private dwellings	12
Council dwellings	6
Business premises	9
Refuse Tips	2
Sewerage system	2
Sewer Outfalls	3

7. INSPECTION AND SUPERVISION OF FOOD AND FOOD PREMISES

The following inspections and re-inspections were carried out during the year:-

Catering Premises	28
Licensed Club Premises	5
Shops and other Food Premises	37

In two cases special reports were made to the Council viz:

<u>Details</u>	<u>Action taken</u>
1. Contamination of bag of potato chips with cigarette filter tip.	Warning letter sent to proprietor of premises
2. Non-compliance with Food Hygiene Regulations at catering premises	No action as premises closed down shortly after report made to Health Committee

Sampling

Six samples of ice cream were taken. Five were classified in Grade I and one in Grade II.

Four samples of liquid egg were submitted for bacteriological examination. The Public Health Laboratory reported no salmonella group organisms isolated.

Foodstuffs condemned and destroyed after voluntary surrender:-

Canned meat and meat products	183 lbs	(44 tins)
Canned fruit	27 lbs	(31 tins)
Canned Vegetables	10 lbs	(11 tins)
Miscellaneous	19 lbs	(13 items)

8. MEAT INSPECTION

The throughput at the main slaughterhouse once again increased on the previous year. The increase in cattle killed was only 2%, but smalls increased by 7660 or 16 $\frac{1}{2}$ % compared to 1961. The amount of meat exported from the district is estimated at between 90% and 95%.

The only bovine animals affected with tuberculosis were reactors directed for slaughter at Liskeard by veterinary officers of the Ministry of Agriculture, Fisheries and Food.

LISKEARD BOROUGH COUNCIL

ANIMALS INSPECTED AND CONDEMNED - MEAT INSPECTOR'S REPORT FOR THE YEAR
ENDING 31st DECEMBER, 1962

	Cattle Excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number Killed 1961	3,591	827	502	24,903	20,988
Number Killed 1962	3,475	1081	554	29,482	24,017
Number inspected 1961	3,591	827	502	24,903	20,988
Number inspected 1962	3,475	1081	554	29,482	24,017
<u>All Diseases except Tuberculosis and Cysticerci</u>					
Whole carcasses condemned	10	32	44	212	73
Carcasses of which some part or organ was condemned	1,235	473	4	5,009	3,730
Percentage of the number inspected affected with Disease other than Tuberculosis and Cysticerci	35.8%	46.7%	8.6%	17.7%	15.8%
<u>Tuberculosis only</u>					
Whole carcasses condemned	.	5	-	-	4
Carcasses of which some part or organ was condemned	67	98	-	-	264
Percentage of the number inspected affected with Tuberculosis	1.9%	9.5%	Nil	Nil	1.1%
<u>Cysticercosis</u>					
Carcasses of which some part or organ was condemned	7	2	-	-	-
Carcasses submitted to treatment by refrigeration	1	2	-	-	-
Generalised and totally condemned	-	1	-	-	-
Percentage of the number inspected affected with Cysticercosis	.23%	.46%	Nil	Nil	Nil

Total weight of meat condemned:- 59 tons 0 cwt. 3 qrs. 26 lbs.

APPENDIX 1.PRINCIPAL CAUSES OF DEATH - ALL AGES - 1962

DISEASE	ST. GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEALTH AREA NO. 7.
Heart disease	71	73	34	17	50	22	267
Cancer (all sites)	36	36	19	12	18	13	134
Vascular lesions of nervous system (stroke)	29	28	11	11	14	8	101
Respiratory disease	19	14	5	3	5	4	50
Circulatory disease	12	8	7	2	5	4	38
Genito-Urinary disease	7	6	5	2	2	3	25
Accidents	3	4	2	3	3	-	*15
Digestive disease	1	3	2	1	1	1	9
Diabetes	2	2	1	1	1	-	7

* Motor vehicle accidents - 6. Other accidents - 9

APPENDIX 2.TYPES OF HEART DISEASE AND CANCER CAUSING DEATH - 1962

TYPE OF DISEASE	ST.GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEALTH AREA NO. 7.
Coronary disease, angina	33	28	16	8	15	10	110
Hypertension with heart disease	7	5	3	2	1	-	18
Other heart disease	31	40	15	7	34	12	139
Cancer of stonach	5	5	1	2	4	2	19
Cancer of breast	4	5	6	1	1	1	18
Cancer of lung and bronchus	6	4	-	4	2	2	18
Cancer of uterus	1	4	-	1	1	1	8
Other Cancers	19	16	12	4	9	7	67

APPENDIX 3DEATHS BY AGE GROUPS - 1962

DISTRICT	0 - 4 Years	5 - 14 Years	15 - 44 Years	45 - 64 years	65 - 74 Years	75 years and over	All Ages
St. Gernans R.D.	4	1	8	43	60	91	207
Liskeard R.D.	3	-	8	40	53	82	186
Saltash M.B.	2	-	-	10	30	53	95
Torpoint U.D.	1	1	5	15	15	23	60
Liskeard M.B.	1	-	1	16	21	65	104
Looe U.D.	2	-	-	11	14	31	58
Health Area No. 7.	13	2	22	135	193	345 (49%)	710

APPENDIX 4AVERAGE AGE AT DEATH - 1962

DISTRICT	MALES	FEMALES
St. Gernans R.D.	71	69
Liskeard R.D.	67	72
Saltash M.B.	72	76
Torpoint U.D.	65	68
Liskeard M.B.	71	80
Looe U.D.	69	74
Health Area No.7.	69	73

APPENDIX 5.

TUBERCULOSIS
NEW CASES AND DEATHS IN HEALTH AREA NO. 7. - 1962

AGE GROUP	NEW CASES		DEATHS	
	M.	F.	M.	F.
0 - 4 YEARS	-	-	-	-
5 - 14 YEARS	1	1	-	-
15 - 24 YEARS	1	1	-	-
25 - 44 YEARS	4	3	-	-
45 - 64 YEARS	9	2	-	-
65 YEARS AND OVER	4	2	1	-
	19	9	1	-
	MALES	FEMALES	TOTAL	
NEW CASE RATES PER 1,000 OF POPULATION	0.38	0.18	0.56	
MORTALITY RATE PER 1,000 OF POPULATION	0.02	-	0.02	

CASE RATES AND MORTALITY RATES PER 1,000 OF POPULATION IN THE SIX COUNTY DISTRICTS
IN HEALTH AREA NO. 7. - 1962

DISTRICT	NEW CASES	ALL KNOWN CASES AT 31.12.62	DEATHS
ST. GERMAN'S R. D.	0.41	5.51	-
LISKEARD R.D.	0.37	4.77	-
SWTASH M.B.	0.40	6.04	-
TORPOINT U.D.	0.34	7.28	-
LISKEARD M.B.	1.54	8.11	0.22
LOOE U.D.	1.34	7.26	-
HEALTH AREA No. 7.	0.56	5.97	0.02
CORNWALL COUNTY	0.38	6.27	0.06

APPENDIX 6

CANCER OF THE LUNG AND BRONCHUS -
DEATHS BY AGE GROUPS AND SEXES - 1962

AGE GROUP	MALES	FEMALES
15 - 24 YEARS	-	-
25 - 44 YEARS	-	-
45 - 64 YEARS	11	2
65 - 74 YEARS	2	-
75 YEARS AND OVER	2	1
ALL AGES	15	3

CANCER OF THE LUNG AND BRONCHUS -
DEATH RATE PER 1,000 OF POPULATION - 1962

	MALES	FEMALES	TOTALS
HEALTH AREA NO. 7.	0.301	0.060	0.361
CORNWALL COUNTY	0.313	0.056	0.369
ENGLAND AND WALES	0.433	0.075	0.508

FACTORIES ACTS, 1937 TO 1959

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1962 FOR THE
BOROUGH OF LISKEARD IN THE COUNTY OF CORNWALL.

Prescribed particulars on the Administration of the Factories Act, 1937

PART I OF THE ACT

1 - INSPECTION FOR Purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises (1)	Number on Register (2)	Inspections (3)	Number of Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	11	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	41	12	2	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises).	7	-	-	-
TOTAL	59	12	2	-

2 - Cases in which DEFECTS were found.

Particulars	Number of cases in which defects were found
Want of Cleanliness (S.1)	Nil
Overcrowding (S.2)	Nil
Unreasonable temperature (S.3)	Nil
Inadequate ventilation (S.4)	Nil
Ineffective drainage of floors (S.6)	Nil
Sanitary Conveniences (S.7)	
(a) Insufficient	Nil
(b) Unsuitable or defective	3
(c) Not separate for sexes	
Other offences against the Act (Not including offences relating to Outwork)	Nil
TOTAL	3

PART VIII OF THE ACT

Outworkers (Sections 110 and 110).

One notification of an outworker was received in respect of a person employed in glove making. Conditions were satisfactory.

